

10/617059

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	See Attached Appendix A	
	Filing Date	See Attached Appendix A	
	First Named Inventor	See Attached Appendix A	
	Group Art Unit	N/A	
	Examiner Name	N/A	
Total Number of Pages in This Submission	7	Attorney Docket Number	524982800200

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below)  Request for Withdrawal as Attorney or Agent (1 page and 2 duplicates) Appendix A (1 page and 2 duplicates) postcard
Remarks		Customer No. 25225

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	Laurie Hill, Reg. No. 51,804 Morrison & Foerster LLP 3811 Valley Centre Drive, Suite 500, San Diego, CA 92130-2332
Signature	
Date	January 8, 2004

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: 1/8/04 Signature: (Matt Russell)



PTO/SB/83 (03-02)  
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<b>REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT</b>	Application Number	See Attached Appendix A
	Filing Dat	See Attached Appendix A
	First Named Inventor	See Attached Appendix A
	Group Art Unit	N/A
	Examiner Name	N/A
	Attorney Docket Number	524982800200

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313

I hereby apply to withdraw as attorney or agent for the above identified application.

This request to withdraw is being made at the request of the applicant.

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**CORRESPONDENCE ADDRESS**

☐ Customer Number

Customer Number

OR

☒ Firm or  
Individual Name

Karen Dow  
Townsend & Townsend & Crew LLP

Address 12730 High Bluff Drive, Suite 400

City San Diego

State

California

Zip

92130

Country United States

Telephone

858 350-6100

Fax

858 350-6111

- ☒ This request is made on behalf of myself and  
☐ all attorneys/agents of record,  
☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or  
☒ the attorneys/agents associated with Customer Number 25225

This request is enclosed in triplicate.

Name Laurie Hill, Reg. No. 51,804

Signature

Date January 8, 2004

**NOTE:** Withdrawal is effective when approved rather than when received.  
Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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Dated: 1/8/04

Signature: Matt Russell (Matt Russell)

## Appendix A

<b>Docket No.</b>	<b>Serial No.</b>	<b>Filing Date</b>
52498-20022.00	10/387,959	3/12/2003
52498-20023.00	10/406,676	4/2/2003
52498-20027.00	10/617,059	7/9/2003



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# REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

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Group Art Unit	N/A
Examiner Name	N/A
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- ☒ Change the correspondence address and direct all future correspondence to:

## CORRESPONDENCE ADDRESS

☐ Customer Number

Customer Number

OR

☒ Firm or  
Individual Name Karen Dow  
Townsend & Townsend & Crew LLP

Address 12730 High Bluff Drive, Suite 400

City	San Diego	State	California	Zip	92130
Country	United States	Telephone	858 350-6100	Fax	858 350-6111

- ☒ This request is made on behalf of myself and
- ☐ all attorneys/agents of record,
  - ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
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This request is enclosed in triplicate.

Name Laurie Hill, Reg. No. 51,804

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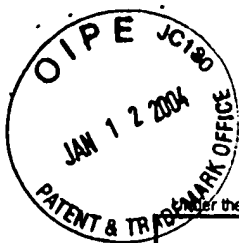
Dated: 1/8/04

Signature: Matt Russell (Matt Russell)



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